

HHS Privacy Impact Assessment (PIA) Summary

HRSA: HRSA Comprehensive Performance Management System

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	HRSA Comprehensive Performance Management System
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	Initial PIA Migration to ProSight
4 Date of this Submission:	Dec 9, 2005
5 OPDIV Name:	HRSA
6 Unique Project Identifier (UPI) Number:	009-15-01-19-02-0000-00-404-142
7 Privacy Act System of Records (SOR) Number:	N/A
8 OMB Information Collection Approval Number:	0
9 Other Identifying Number(s):	N/A
10 System Name:	Comprehensive Performance Management System and the Uniform Progress Report
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Mark Wheeler
12 Provide an overview of the system:	The CPMS-UPR is a web-based data collection and reporting system. CPMS-UPR web-based system provides grantees online forms to supply BHPr with the required data to complete the Comprehensive Performance Management System (CPMS) Report and the Uniform Progress Report (UPR). The CPMS forms are used to measure outcomes of the Bureau's Title VII and VIII health professions nursing education programs. The UPR report summarizes the grantees' progress in meeting their grant objectives.
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	Yes
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	This information is not shared.
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	The annual reports to Congress disclose the: * Actual performance achieved compared to the goals expressed in the Annual Performance Plan, * Reasons why a goal may not have been met, and * Describe future plans and provide a schedule for meeting the goal.
18 Describe the consent process:	The grant application process requires an individual to supply individual information whether applying in paper or electronic form. This information is verified before grants are awarded. Individuals receive an email notification indicating information was submitted successfully.
19 Does the system host a website?	No
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	Yes
22 Are there technical controls present?	Yes
23 Describe the IIF security controls:	The information is public.
24 Sr Official of Privacy Signature:	Cheryl Dammons
25 Sr Official of Privacy Signoff Date:	Jun 5, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

HRSA: HRSA General Support Systems

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	HRSA General Support Systems
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	Initial PIA Migration to ProSight
4 Date of this Submission:	Dec 9, 2005
5 OPDIV Name:	HRSA
6 Unique Project Identifier (UPI) Number:	009-15-02-00-02-1060-00-404-139 (GSS) (HRSA OIT GSS)
7 Privacy Act System of Records (SOR) Number:	N/A
8 OMB Information Collection Approval Number:	N/A
9 Other Identifying Number(s):	N/A
10 System Name:	HRSA OIT General Support System (GSS)
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Jim Von Bargen
12 Provide an overview of the system:	Support connectivity to HRSA personnel and Website Hosting for HRSA.
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	N/A
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	This system does not collect data, rather it supports HRSA applications.
18 Describe the consent process:	N/A
19 Does the system host a website?	No
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	Yes
22 Are there technical controls present?	Yes
23 Describe the IIF security controls:	N/A
24 Sr Official of Privacy Signature:	Cheryl Dammons
25 Sr Official of Privacy Signoff Date:	Jun 5, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

HRSA: HRSA Health Education Assistance Loan Program

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2Summary of PIA Required Questions

Question	Response
1 System:	HRSA Health Education Assistance Loan Program
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	Initial PIA Migration to ProSight
4 Date of this Submission:	Dec 9, 2005
5 OPDIV Name:	HRSA
6 Unique Project Identifier (UPI) Number:	009-20-01-14-02-1040-00-206-084
7 Privacy Act System of Records (SOR) Number:	09-15-0044
8 OMB Information Collection Approval Number:	0915-0036
9 Other Identifying Number(s):	N/A
10 System Name:	Health Education Assistance Loan Program (HEAL) Online Processing (HOPS)
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Nancy Durham
12 Provide an overview of the system:	HOPS is an automated system that tracks and maintains HEAL-related loan information. HEAL information consists of: Borrowers; Loans; Claims; Litigations against defaulted loans; Lenders; and Educational Institutions receiving loan funds. Loan servicing organizations use HOPS information to update and verify the accuracy or status of loan guarantees.
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	Yes
15 Is the system subject to the Privacy Act?	Yes
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	Loan Servicers for verification of loan data.
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	The purpose of the system is 1) to identify students participating in the HEAL program 2) to determine eligibility of loan applicants and to compute insurance premium for federal insurance 3) to monitor the loan status of HEAL recipients, which includes the collection of overdue debts owed under the HEAL program and 4) to compile and generate managerial and statistical reports. The categories of records in the system contains name , SSN, birth date, demographic background, educational status, loan location and status, and financial information about the individual for whom the record is maintained, lender and school identification. Disclosure of the applicant's SSN is mandatory for participation in the HEAL program as provided for by Section 4 of the Debt Collection Act of 1982.
18 Describe the consent process:	Applicant Form HRSA-700 states the SSN will be used to verify the identity of the applicant and as an account number throughout the life of the loan to record necessary data accurately. Applicants are advised that failure to provide his/her SSN will result in the denial of the individual to participate in the HEAL program. To find out if the system contains records about an individual system manager is contacted by a request in person that requires at least one tangible identification card; or request by mail containing the name and address of the requester, birth date, at least one tangible identification card, and signature.
19 Does the system host a website?	No
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	Yes
22 Are there technical controls present?	Yes

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

HRSA: HRSA Health Education Assistance Loan Program

- 23 Describe the IIF security controls:

The system is housed in a government facility with adequate physical controls. All information is treated as sensitive. Secure protocols are used to transmit information to HRSA.
- 24 Sr Official of Privacy Signature:

Cheryl Dammons
- 25 Sr Official of Privacy Signoff Date:

Jun 5, 2006

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HHS Privacy Impact Assessment (PIA) Summary

HRSA: HRSA National Practitioner Data Bank/Healthcare Integrity and Protection Data Bank

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2Summary of PIA Required Questions

Question	Response
1 System:	HRSA National Practitioner Data Bank/Healthcare Integrity and Protection Data Bank
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	Initial PIA Migration to ProSight
4 Date of this Submission:	Dec 9, 2005
5 OPDIV Name:	HRSA
6 Unique Project Identifier (UPI) Number:	009-15-01-11-01-1010-00-110-031
7 Privacy Act System of Records (SOR) Number:	09-15-0054
8 OMB Information Collection Approval Number:	0
9 Other Identifying Number(s):	N/A
10 System Name:	National Practitioner Data Bank (NPDB) and Healthcare Integrity and Protection Data Bank (HIPDB)
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Darryl Gray
12 Provide an overview of the system:	The NPDB provides a nationwide database that makes adverse information on physicians, dentists, and other health care practitioners available to health care entities, hospitals, professional societies, and State licensing boards. The HIPDB is a national database the provides information on health care related convictions and judgments, licensure actions, exclusions from government programs and other adjudicated actions.
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	Yes
15 Is the system subject to the Privacy Act?	Yes
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	The NPDB/HIPDB program shares information with the Registered Entities in accordance with Congressional mandate and Federal law. Federal law requires that health care entities, hospital, professional societies and State licensing boards report adverse information (health care related convictions and judgments, licensure actions, exclusions from government programs and other adjudicated actions) on physicians, dentists and other health care practitioners to the NPDB/HIPDB. The information must identify the specific practioner and is not voluntary.
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	The NPDB provides a nationwide database that makes adverse information on physicians, dentists, and other health care practitioners available to health care entities, hospitals, professional societies, and State licensing boards. The HIPDB is a national database the provides information on health care related convictions and judgments, licensure actions, exclusions from government programs and other adjudicated actions. These entities are required to report information to this database, and the individual that is the subject of the report has the ability to recieve a copy of the file. Data is to be shared only with the Registered Entities, and new entities are investigated before recieving access.
18 Describe the consent process:	Yes
19 Does the system host a website?	No
20 Does the website have any information or pages directed at children under the age of thirteen?	Yes
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	Yes
22 Are there technical controls present?	Yes
23 Describe the IIF security controls:	The IIF is secured through the use of a secure facility, and transmission lines. Employees of the covered entities are advised of the legal consequences of misuse of NPDB/HIPDB information.

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HHS Privacy Impact Assessment (PIA) Summary

HRSA: HRSA National Practitioner Data Bank/Healthcare Integrity and Protection Data Bank

24 Sr Official of Privacy Signature: Cheryl Dammons

25 Sr Official of Privacy Signoff Date: Jun 5, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.



HHS Privacy Impact Assessment (PIA) Summary

HRSA: HRSA Nursing Information System

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question

Response

- 1 System:

HRSA Nursing Information System
- 2 Is this a new PIA?

Yes
- 3 If this is an existing PIA, please provide a reason for revision:

Initial PIA Migration to ProSight
- 4 Date of this Submission:

Mar 23, 2006
- 5 OPDIV Name:

HRSA
- 6 Unique Project Identifier (UPI) Number:

009-15-01-09-02-1430-00-110-247
- 7 Privacy Act System of Records (SOR) Number:

9-15-0037
- 8 OMB Information Collection Approval Number:

NELRP OMB 00915-0140; NSP OMB 0915-0226
- 9 Other Identifying Number(s):

N/A
- 10 System Name:

Nursing Information System
- 11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:

Terri L. Cohen
- 12 Provide an overview of the system:

The BHP_r provides scholarships and loans in exchange for service in underserved communities and increasing access to comprehensive primary and preventive health care and for improving the health status of underserved and vulnerable populations. The mission of BHP_r in relation to the following three programs is to provide automated support necessary to carry out program functions efficiently for HRSA.
- 13 Indicate if the system is new or an existing one being modified:

New
- 14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?

Yes
- 15 Is the system subject to the Privacy Act?

Yes
- 16 If the system shares or discloses IIF please specify with whom and for what purpose(s):

HRSA OIT for the HDFW, CORE/UFMS for obligations and payment of tuition and fees to schools and Lyceum for payroll for payment of stipend and other reasonable costs for Nursing Scholarship Program scholars. The original IIF is found only in NIS. Some systems share information provided by NIS, but since NIS is the source of the data the information is compelled to match. It should be mentioned that the most sensitive information is not passed on to other systems (passwords, SSNs, etc.)

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

HRSA: HRSA Nursing Information System

- 17

Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:
- The Division of Nursing (DN), BHP/HRSA currently has the functionality within the NIS application to process data concerning the Nursing Education Loan Repayment Program (NELRP). The current process collects application data via a web based front end, provides functionality to process the paper based Optical Mark Read (OMR) application documents into the system, provides a process for staff to edit and manage the data, provides functionality that ranks, awards, generates documents needed to obligate funds, and generates an electronic file that is used to create the disbursement of monies. In addition, the functionality also provides for a suite of management reports and functionality to export program data out of NIS. The data contains mandatory personal information related to the applicant, ssn, address, school, loan and bank information

The Division of National Health Service Corps (DNHSC), BHP/HRSA currently has the functionality within the NIS application to process applications for the Nursing Scholarship Program (NSP). The current process collects the application data via a web based front end, allows program to process the data, which includes functionality that ranks, awards, obligates and generates an electronic file that is used to create the disbursement of monies. The data contains mandatory personal information related to the applicant, ssn, address, and school information.

The Shortage Designation Branch (SDB) in the National Center for Health Workforce Analysis (NCHWA) BHP/HRSA currently has the functionality within the NIS application to process Medically Underserved Areas and Populations (MUA/P). The current process allows program to process MUA/P data, which includes functionality that adds, deletes and modifies the MUA/P, provides reporting capabilities and allows for the extraction of the data to an electronic file. In addition, the NIS provides access for the HRSA Geospatial Data Warehouse (HGDW) to mine the data for use within in its system.
- 18

Describe the consent process:
- Prior to actually registering individuals are asked to read the rules or behavior, non disclosure, and Acceptable Use Policy posted on the site. They can only proceed into the system if they choose the "I ACCEPT" button on the screen which allows them to move forward. If individuals choose not to accept, then they are returned to the general information screen. This is a field that is stored in the database. Since this system is based on cycles, the data field is checked for each new cycle year and forces them to re-acknowledge/reaccept.
- 19

Does the system host a website?
- Yes
- 20

Does the website have any information or pages directed at children under the age of thirteen?
- No
- 21

Are there policies or guidelines in place with regard to the retention and destruction of IIF?
- Yes
- 22

Are there technical controls present?
- Yes
- 23

Describe the IIF security controls:
- All NIS user information is secured in a SQL Server 2000 database and protected via role permissions and SQL Server authentication. External (non-HRSA) personnel are only able to view/edit their own information. Internal users (HRSA personnel) are allowed to view information based on one of several pre-defined roles defined in the NIS administrative system. Only a select few users have the ability to manipulate these roles and permission to view external user's information. In addition to the above safeguards, all users passwords are encrypted with 128-bit encryption and unique 25 character user keys randomly generated upon account creation. Users are locked out after 3 unsuccessful login attempts and can only be unlocked by contacting the appropriate HRSA personnel (Generally the HRSA Call Center).
- 24

Sr Official of Privacy Signature:
- Cheryl Dammons
- 25

Sr Official of Privacy Signoff Date:
- Jun 5, 2006

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HHS Privacy Impact Assessment (PIA) Summary

HRSA: HRSA Organ Procurement and Transplantation Network

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2 Summary of PIA Required Questions

Question	Response
1 System:	HRSA Organ Procurement and Transplantation Network
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	Initial PIA Migration to ProSight
4 Date of this Submission:	Dec 9, 2005
5 OPDIV Name:	HRSA
6 Unique Project Identifier (UPI) Number:	009-15-01-13-01-1030-00-110-031
7 Privacy Act System of Records (SOR) Number:	68 Fed Reg. 173 (2003)
8 OMB Information Collection Approval Number:	0915-0157
9 Other Identifying Number(s):	N/A
10 System Name:	Organ Procurement and Transplantation Network (OPTN)
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Virginia McBride
12 Provide an overview of the system:	OPTN's primary function is matching donated human organs to potential recipients. It is the only system in the country that serves this function for heart, lung, liver, pancreas, intestine, and kidney transplants. As part of this function, the OPTN systems maintain the active list of patients waiting for transplants.
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	Yes
15 Is the system subject to the Privacy Act?	Yes
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	United Network for Organ Sharing (UNOS) will share information with HRSA, SRTR and with Medicare according to Federal Law.
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	Information is obtained from medical personnel at organ transplantation centers. The information is voluntary, but a requirement for the program.
18 Describe the consent process:	The information is taken from medical records. It is used to correlate those needing organs with donor organs as they become available based on strict guidelines.
19 Does the system host a website?	Yes
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	Yes
22 Are there technical controls present?	Yes
23 Describe the IIF security controls:	The data is transported over secure protocols, and stored in a secure facility.
24 Sr Official of Privacy Signature:	Cheryl Dammons
25 Sr Official of Privacy Signoff Date:	May 30, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.



HHS Privacy Impact Assessment (PIA) Summary

HRSA: HRSA Scientific Registry of Tranplantation Recipients

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2Summary of PIA Required Questions

Question	Response
1 System:	HRSA Scientific Registry of Tranplantation Recipients
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	Initial PIA Migration to ProSight
4 Date of this Submission:	Dec 9, 2005
5 OPDIV Name:	HRSA
6 Unique Project Identifier (UPI) Number:	009-15-01-19-03-1300-00-404-142
7 Privacy Act System of Records (SOR) Number:	09-15-0055
8 OMB Information Collection Approval Number:	OMB Number -0915-0157
9 Other Identifying Number(s):	N/A
10 System Name:	Scientific Registry of Transplant Recipients
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Gregory Fant
12 Provide an overview of the system:	The SRTR supports the ongoing evaluation of the scientific and clinical status of solid organ transplantation including kidney, heart, liver, heart-lung, lung, and pancreas transplants. At present the SRTR contains information on approximately 500,000 transplant recipients and transplant candidates starting in 1988. The data begins with the listing of each transplant candidate on a transplant waiting list and continue through follow-ups of the patient after the transplant. The SRTR provides analytical support to the Division of Transplantation, the Secretary's Advisory Committee on Organ Transplantation, and the committees of the Organ Procurement and Transplantation Network. The SRTR provides center-specific reports to all of the transplant programs and organ procurement organizations in the U.S.
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	Yes
15 Is the system subject to the Privacy Act?	Yes
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	Data with identifiers may be provided to other researchers with approval of the SRTR Scientific Advisory Committee, the HRSA project officer and an Information Reveiw Board and after execution of a data use agreement. Specific patients of a transplant center may be identified by communications that transplant centers are using their center-specific reports.
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	When people make a request for information via the web site, they voluntarily give contact information with an understanding that it will be used to reply. All other IIF is obtained from OPTN, and is covered by their privacy assessment.
18 Describe the consent process:	Data about transplant candidates and recipients from the OPTN and from CMS are required. The information will be used for analytical support to HRSA, the OPTN, and outside researchers. Additionally, basic contact information (name, mailing address, telephone number, email address) is collected from data requestors.
19 Does the system host a website?	Yes
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	Yes
22 Are there technical controls present?	Yes
23 Describe the IIF security controls:	All SRTR data is maintained on a private system without online interconnections to othe systems. Data is received from United Network for Organ Sharing periodically.
24 Sr Official of Privacy Signature:	Cheryl Dammons

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.



HHS Privacy Impact Assessment (PIA) Summary

HRSA: HRSA Scientific Registry of Tranplantation Recipients

25 Sr Official of Privacy Signoff Date: May 30, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

HRSA: HRSA Title V Information System

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question

Response

1 System:	HRSA Title V Information System
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	Initial PIA Migration to ProSight
4 Date of this Submission:	Dec 9, 2005
5 OPDIV Name:	HRSA
6 Unique Project Identifier (UPI) Number:	009-15-01-19-02-0000-00-404-142 (TVIS)
7 Privacy Act System of Records (SOR) Number:	N/A
8 OMB Information Collection Approval Number:	0
9 Other Identifying Number(s):	N/A
10 System Name:	Title V Information System
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Meribeth Reed
12 Provide an overview of the system:	MCHB administers the Title V Block Grant Program, through which approximately \$600 million is currently distributed to the 59 U.S. States and territories and the District of Columbia. All grantee entities (e.g., States) are required to submit required reporting annually to comply with the Federal Guidance. To fulfill these requirements, the State must submit required forms and an annual report. Grants are given to states to provide healthcare. Data is aggregated by the states and reported to HRSA via the TVIS system.
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	N/A
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	There is no IIF in TVIS.
18 Describe the consent process:	N/A
19 Does the system host a website?	Yes
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	Yes
22 Are there technical controls present?	Yes
23 Describe the IIF security controls:	N/A
24 Sr Official of Privacy Signature:	Cheryl Dammons
25 Sr Official of Privacy Signoff Date:	Jun 5, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.